

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Western Reception Diagnostic & Correctional Center (WRDCC)			
Custody Level	C 1-5	Warden	Ryan Crews
Total Acreage	158 (Approx.)	Address	3401 Faraon
Acreage w/in Perimeter	71 (Approx.)		St. Joseph, MO 64506
Square Footage	All Buildings – 720,000	Telephone:	816-387-2158
Year Opened	1999	Fax:	816-387-2217
Operational Capacity/Count (as of today)	1980/		
General Population Beds (capacity and count)	700/	Deputy Warden	Heath Spackler, DWO
Segregation Beds (capacity and count)	136/	Deputy Warden	
Treatment Beds (capacity and count)	645/	Asst. Warden	Nancy Alldredge
Work Cadre Beds (capacity count)	None	Asst. Warden	Krista Helton
Diagnostic Beds (capacity and count)	496/	Major	Thaniel McFee
Protective Custody Beds (capacity and count)	None		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution?
Good.
- b. What capital improvement projects do you foresee at this facility over the next six years?
 - 1. Security System (Blackcreek) and perimeter fence upgrade.*
 - 2. Remove/demolition of Progress Hall.*
 - 3. New Multi-Purpose Building.*
 - 4. ILS upgrade on roof/plumbing/electrical/classrooms/HVAC.*
 - 5. Re-roofing the laundry building and powerhouse.*
 - 6. Renovation of Housing Unit #10, J-wing.*
 - 7. Renovation of the Food Service floor.*
 - 8. Repair utility tunnels.*
 - 9. Upgrade electrical system in Housing Unit #11.*
 - 10. Re-roof/upgrade HVAC, electrical and plumbing in Offender Property Building.*
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
Very critical.

2. Staffing:

- a. Do you have any critical staff shortages?
Vacancies: 4 – Corrections Officer I's; 1 – Corrections Case Manager III; 1 – Corrections Manager; 3 – Corrections Officer II's; 1 – Cook II; 1 – Recreation Officer I. The cooks

are always hard to fill because very few applicants are on the register. (In my opinion with the continuing core cuts, each vacancy would be critical.)

- b. What is your average vacancy rate for all staff and for custody staff only?
There is an average vacancy rate for all staff of 15.38% and 14.40% for custody staff.
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
Yes, the accrual/usage of compensatory time presents a daily challenge to custody supervisors to minimize accrual and to ensure compensatory time reduction occurs in a manner which ensures adequate daily staffing while accommodating staff requests for leave.
- d. What is the process for assigning overtime to staff?
The vast majority of overtime accrued is the result of holidays. The earned overtime is primarily accrued in areas such as transportation runs. All other overtime accrued by staff is assigned first by requesting volunteers and then by assignment based on seniority if no volunteers are found.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?
For Corrections Officer I and II staff, approximately 42% of the comp-time accrued is paid off and the remaining 58% is retained or used. Other staff do not receive comp time payouts and must use it as time off.
- f. Is staff able to utilize accrued comp-time when they choose?
Every effort is made to accommodate staff requests. In most cases, staff utilize accrued compensatory time on dates of their choice based on the needs of the facility.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
WRDCC currently does not have a GED program for general population offenders. This was eliminated when the contract was discontinued in 2009. WRDCC has a small GED program in our treatment center that is operated by the St. Joseph School District from grant funding. WRDCC also has an Incarcerated Individuals Program (IIP) which allows eligible offenders to participate in college level course through the Western Institute through Missouri Western State University. Offenders are able to receive college credit hours upon completion.
- b. How many (and %) of inmate students earn their GED each year in this institution? *In our treatment program, we had 170 offenders participating in GED classes on a part time basis (about 29 % of treatment offenders). Last fiscal year 135 offenders receive a GED and only 4 offenders took the test but failed to pass.*
- c. What are some of the problems faced by offenders who enroll in education programs?
When we had a GED program, some of the problems faced are identified below. Many of these are also challenges for our Youthful Offender Programs.
 - 1. Inability to complete the program due to the brevity of term at WRTC*
 - 2. Conflict with other required programs*
 - 3. Entry level academic skills*
 - 4. Low self esteem related to educational history*
 - 5. Family and social stressors*
 - 6. Mental disorders*
 - 7. Medical conditions*

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?

WRDCC has treatment programs run Division of Offender Services and Gateway, a contract provider. Gateway became our contract provider as of July 1, 2010. Prior to that our provider was KCCC. The following programs are offered.

- *180-OUT, Offenders Under Treatment, 6 Month Program*
 - *BSAP, Board Ordered 6 Month Program*
 - *120-Day Treatment, Court and Board Ordered*
 - *Post Conviction Treatment*
 - *84 Day Parole Violator Treatment*
 - *Partial Day Treatment Program*
- b. How many beds are allocated to those programs?
- *180-OUT, Offenders Under Treatment, 6 Month Program (DORS) - 45*
 - *BSAP, Board Ordered 6 Month Program (Gateway) - 135*
 - *120-Day Treatment (Gateway) – 140*
 - *120-Day/Post Conviction/Parole Violator (DORS) - 275*
 - *Partial Day Treatment Program - 50*
- c. How many offenders do those programs serve each year?
- *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 533 (July 2010 to July 2011)*
 - *BSAP, Board Ordered 6 mo. Program (Gateway) – 503 (July 2010 to July 2011)*
 - *120-Day Treatment (Gateway) – 619 (July 2010 to July 2011)*
 - *120-Day Treatment (DORS) – 2,064 (July 2010 to July 2011)*
 - *Post Conviction Treatment (DORS) – 299 (July 2010 to July 2011)*
 - *84 Day Parole Violator – 766 (July 2010 to July 2011)*
 - *Intermediate Treatment Program (Gateway) – 503 (July 2010 to July 2011)*
- d. What percent of offenders successfully complete those programs?
- *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 95%*
 - *BSAP, Board Ordered 6 mo. Program (Gateway) - 80%*
 - *120-Day Treatment (Gateway) - 67%*
 - *120-Day Treatment (DORS) – 92%*
 - *Post Conviction Treatment (DORS) – 96%*
 - *84 Day Parole Violator (DORS) – 89%*
 - *Intermediate Treatment Program (Gateway) - 80%*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?
- Establishing a level of trust to deal with issues of the clients' former lifestyles. Breaking through the denial of the seriousness of a client's substance abuse/dependency and criminal lifestyle is a task. Management of the MH-3 / MH-4 clients and dual diagnosed offenders. It is also difficult to work with some of the offenders with numerous medical restrictions and lay-ins due to their limitations. We make every effort to work with these offenders to the best of our ability, however, many times it is difficult to get them all of the services they really need while they are in the prison setting. The biggest challenge at this time is receiving a higher number of Mental Health 3 and 4 offenders.*

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?
- WRDCC does not have any vocational programming*
- b. How many offenders (and %) participate in these programs each year?
- N/A*

- c. Do the programs lead to the award of a certificate?
N/A
- d. Do you offer any training related to computer skills? *Offenders use computer in the Employability Skills/Life Skills program and some computer fundamentals may be provided during the program. In our Incarcerated Individuals Program (college classes) they are offering a computer-based course called Professional Skills Certificate Program. We are conducting this course for the first time this year, but the university may begin offering annually.*

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?
None
- b. How many (and %) of offenders work for MVE at this site?
None
- c. Who are the customers for those products?
N/A
- d. What skills are the offenders gaining to help them when released back to the community?
N/A

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?
Yes .
- b. How many offenders are seen in chronic care clinics?
Approximately 300 a month are for routine chronic care visits by either nursing or physician..
- c. What are some examples of common medical conditions seen in the medical unit?
Back pain, athlete's foot, sinus congestion, sports injuries, heartburn.
- d. What are you doing to provide health education to offenders?
Annual health fair, education during nursing and provider appointments, pamphlets available in medical waiting rooms, occasional use of offender information channel (TV).
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
No active cases of TB have been identified in the facility.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.
Yes, however most aged offenders have a higher medical score than can be accommodated at WRDCC, so we have not seen a significant effect in population.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?
Upon arrival at WRDCC's R&D unit, every offender responds to questions on an Intake Mental Health Screening form completed by a medical nurse. Offenders arriving with verified psychotropic medication have an immediate face to face evaluation with a qualified Mental Health Professional (QMHP). A QMHP is a Missouri Licensed Psychologist, Counselor, or Social Worker.

In the medical screening room there is a large copy of a Medical Service Request (MSR). Orientation describes the MSR process and during the Mental Health Intake offenders are again educated on the MSR process. The Mental Health Intake is an interview that

determines Mental Health Level and need of services. The Intake is conducted between day 5 and 10 of the Diagnostic process.

The Referral and Screening Note (RSN) may be completed and submitted by any staff member, which again results in an individual encounter with a QMHP. All QMHP's have a caseload of Mental Health 3 offenders and also to handle emergency services, as needed their assigned housing units. In the evenings and on weekends and holidays QMHP's rotate on-call to ensure 24 hour coverage for all offenders.

Staff in various housing units refer offenders to a variety of Mental Health groups ranging from Adjustment to Incarceration, Anger Management and Trauma Groups. There is a WRDCC Health Fair yearly at which Mental health Department participates.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There have been no completed suicides since WRDCC opened in 1999. There is close communication between DOC staff and Mental Health, with a very proactive approach regarding intervention. All WRDCC staff attend CORE training yearly. Suicide Prevention training includes information and education including risk factors. Mental Health has 9 single camera cells which are monitored by custody no less than 4 times an hour. We also have access to 2 additional camera cells in the TCU. QMHP's have daily contact with offenders on suicide watch, custody provides timely and relevant information by documentation in the chronology file, as well as informing Mental Health of their observations to assist in modifications for the offenders on suicide watch.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

As of January 2012 it is 519 (27%). We have noticed a steady increase in the number of chronic and serious mentally ill offenders.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

Those (MH 4) offenders in the diagnostic center are seen weekly to monitor symptoms of mental illness. They are also referred, as criteria applies, to the Social Rehabilitation Unit (SRU) at FCC, or the Special Needs Unit (SNU) at PCC. This year at JCCC, we gained a Secure Social Rehabilitation Unit (SSRU). Offenders who are at risk in general population due to mental illness are placed on Close Observation pending transfer or assimilation to general population with symptom management.

Offenders with acute psychiatric symptoms that meet criteria as an imminent risk of harm to self and/or others, and other criteria, may be referred by the psychiatrist for a Due Process and Involuntary Medication Hearing. This has occurred 4 times this year due to the more chronic and severely mentally ill population we receive.

All offenders with a Mental Health diagnosis participate in the creation of an Individual Treatment Plan to identify problems and goals. These offenders are placed in Mental Health Chronic Care, 438 at this time. These offenders meet with a QMHP at least once a month and sooner if needed. They have regular appointments with a staff psychiatrist and a psychiatric nurse.

9. What is your greatest challenge in managing this institution?
The most challenging part is the overall management of the facility's large workforce and the aging physical condition of many of the facility's buildings which is made more difficult due to budgetary constraints and staffing constraints..
10. What is your greatest asset to assist you in managing this institution?
The staff are the greatest asset followed by the support provided by the Division's executive staff. The facility's executive staff, section heads, and shift commanders continue to make it possible to manage the institution in a safe and effective manner.
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Fleet Vehicles

Mileage as of 1/31/12

<i>8 Crown Vic.</i>	<i>Mileage</i>	<i>Year</i>	<i>Status</i>
<i>13-0010</i>	<i>71,283</i>	<i>2007</i>	<i>Inmate Transport</i>
<i>13-0025</i>	<i>54,368</i>	<i>2007</i>	<i>Inmate Transport</i>
<i>13-0332</i>	<i>61,216</i>	<i>2007</i>	<i>Inmate Transport</i>
<i>13-0352</i>	<i>118,823</i>	<i>2003</i>	<i>Perimeter Vehicle</i>
<i>13-0396</i>	<i>64,613</i>	<i>2006</i>	<i>Inmate Transport</i>
<i>13-0705</i>	<i>99,251</i>	<i>2004</i>	<i>Perimeter Vehicle</i>
<i>13-0724</i>	<i>70,879</i>	<i>1998</i>	<i>Specialty Squad</i>
<i>13-0792</i>	<i>46,554</i>	<i>2008</i>	<i>Inmate Transport</i>

5 Max Vans

<i>13-0268</i>	<i>104,098</i>	<i>2006</i>	<i>Inmate Transport</i>
<i>13-0278</i>	<i>119,172</i>	<i>2007</i>	<i>Inmate Transport</i>
<i>13-0346</i>	<i>147,896</i>	<i>1997</i>	<i>Inmate Transport Handicap</i>
<i>13-0394</i>	<i>109,286</i>	<i>2006</i>	<i>Inmate Transport</i>
<i>13-0730</i>	<i>47,796</i>	<i>1998</i>	<i>Specialty squad</i>

1 Bus

<i>13-0372</i>	<i>100,640</i>	<i>2010</i>	<i>Inmate Transport</i>
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3 Mini Vans

<i>13-0675</i>	<i>102,227</i>	<i>2008</i>	<i>Inmate Transport</i>
<i>13-0677</i>	<i>90,124</i>	<i>2008</i>	<i>Inmate Transport</i>
<i>32-0259</i>	<i>87,979</i>	<i>2008</i>	<i>Inmate Transport</i>

4 Impalas

<i>32-0233</i>	<i>68,729</i>	<i>2008</i>	<i>Pool</i>
<i>32-0239</i>	<i>71,779</i>	<i>2008</i>	<i>Pool</i>
<i>32-0242</i>	<i>86,153</i>	<i>2008</i>	<i>Pool</i>
<i>32-0246</i>	<i>67,162</i>	<i>2008</i>	<i>Pool</i>

1 Suburban

<i>13-0707</i>	<i>42,468</i>	<i>1999</i>	<i>Specialty Squad</i>
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12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.

Medium: *Staff are concerned about the lack of cost of living adjustments, pay raises, and the rising cost of health insurance. Budget cuts and loss of staff positions as well as increased work loads are concerns on morale; doing more with less is a serious security concern that affects morale and the safety and security of staff and the institution.*

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

- *Housing Unit #1(Treatment) - 5 Corrections Case Manager II's , 1 Corrections Classification Assistant*
- *Housing Unit #6 (Transitional Housing Unit and Work Release) - 7 Corrections Case Manager II's, 1 Corrections Classification Assistants, 1 Institutional Activity Coordinator*
- *Housing Unit #10 (Diagnostic Center) - 1- Corrections Case Manager III (open), 7- Corrections Case Manager II's*
- *Housing Unit #10 (Administrative Segregation) - 3- Corrections Case Manager II's, 1- Corrections Classification Assistant*
- *Housing Unit #11(General Population) - 6 – Corrections Case Manager II's, 1 - Corrections Classification Assistant*
- *Grievance Office - 1 Corrections Case Manager II*

B. Do you currently have any caseworker vacancies?

No

C. Do the caseworkers accumulate comp-time?

Yes, but we try to use flex scheduling to avoid accumulation of any overtime.

D. Do the caseworkers at this institution work alternative schedules?

Yes, two of them.

E. How do inmates gain access to meet with caseworkers?

Through an open-door policy, by submitting written request, or by being placed on a call-out list.

F. Average caseload size per caseworker?

54 Offenders to 1 Caseworker

- # of disciplinary hearings per month?
Housing Unit #1 – 131 monthly average
Housing Unit #6 – 94.4 monthly average
Housing Unit #10 – 138.1 monthly average
Housing Unit #11 – 146 monthly average
- # of IRR's and grievances per month?
Housing Unit #10 – 28.7 monthly average
Housing Unit #1 – 10 monthly average
Housing Unit #6 – 41.6 monthly average
Housing Unit #11 – 41 monthly average
Grievances (entire facility) – 44.75 monthly average
1,322 Total IRRs for 2010
537 Total Grievances for 2010
- # of transfers written per month?
Housing Unit #1 – 8 monthly average
Housing Unit #6 – 14 monthly average
Housing Unit #11 – 25 monthly average

Housing Unit #10 - averages 1.6 (Transfers do not include those offenders sent out of the Diagnostic Center to other facilities; only transfers written and submitted to Central Transfer Authority.)

- # of re-classification analysis (RCA's) per month?

Housing Unit #1 – 38 monthly average

Housing Unit #6 – 81.8 monthly average

Housing Unit #11 – 43 monthly average

Housing Unit #10 averages 118 RCA's

Housing Unit #10 averages 168 ICA's

- G. Are there any services that you believe caseworkers should be providing, but are not providing?

No

- H. If so, what are the barriers that prevent caseworkers from delivering these services?

N/A

- I. What type of inmate programs/classes are the caseworkers at this institution involved in?

Pathways to Change, Impact of Crime on Victims Class, Inside Out Dads, Anger Management.

- J. What other duties are assigned to caseworkers at this institution?

Notary services, classification file reviews, AICS (Adult Internal Classification System), process all visiting forms, process death and critical illness notices, make all housing and job assignments, case management team member, RCA (Reclassification Analysis), TAP (Transitional Accountability Plans), contacting outside agencies for referral services, possible enemy/protective custody investigations, order supplies and maintain inventory for housing units, back-up for custody staff, searches and counts, attend mandatory meetings (Medical, Fire/Safety), provide daily counseling to offenders, diagnostic processing and fill in as acting Functional Unit Manager when needed. Required to obtain 40 hours of training per year.

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution?

13 POII's, 1 POIII

- B. Do you currently have any staff shortages?

No, we are fully staffed

- C. Do the parole officers accumulate comp-time?

On rare occasions

- D. Do the parole officers at this institution flex their time, work alternative schedules?

Yes

- E. How do inmates gain access to meet with parole officers?

Open door, callouts, and kites

- F. Average caseload size per parole officer? ***140***

- # of pre-parole hearing reports per month? ***65-75***
- # of community placement reports per month? ***30-40***
- # of investigation requests per month? ***175-200***

- G. Are there any services that you believe parole officers should be providing, but are not providing?

No

- H. If so, what are the barriers that prevent officers from delivering these services?

N/A

- I. What type of inmate programs/classes are the parole officers at this institution involved in?

Two officers are trained for Pathways to Change and two are trained for Anger Management.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

In addition to the above, I would like to talk about the need to fund repairs to the physical plant, the need for a larger Administrative Segregation Unit, and employee salaries.

16. Does your institution have saturation housing? If so, how many beds?

- ***Housing Unit #6 has 40 saturation beds***
- ***Housing Unit #10 has 205 saturation beds as well as room for up to 64 temporary beds.***

17. **Radio/Battery Needs:**

What is the number of radios in working condition?

HT-1000 Radio's

278 serviceable UHF

50 serviceable VHF

3 out of service

50 battery supply

3 conditioner serviceable

5 chargers w/plates serviceable

2 chargers serviceable

45 battery supply

HT-750 Radio's

78 serviceable

12 chargers serviceable

75 battery supply

- a. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **Yes**